CITY OF FAYETTEVILLE 240 GLYNN STREET SOUTH FAYETTEVILLE, GA. 30214 770-461-6029

2006 OCCUPATIONAL TAX APPLICATION

() Single Proprietor() Corporation/Partnership() Home Occupation() Non-Profit Organization) Alcohol Of	() Alcohol On-Premise() Alcohol Off-Premise		01-01-2006 ED 04-01-2006 ED 05-01-2006	
Application Completed By:					
Business Name		Applican	t / Manager / Owner		
Business Address		Mailing/Billing Address for Business			
City State	Zip	City	State	Zip	
Business Telephone Number		Applicant/Owner's Phone Number			
Name of Property Owner			Cax ID		
Address		State Tax	(ID		
City State	Zip		zen?YesNo ease attach copy of green	card.	
NATURE OR CHARACTE	ER OF BUSINESS:				
	Choose Your	Γax Method for	2006		
Gross Revenues Method:		Flat Fee Method:			
\$	~	\$3	300.00 Per Professional Pe	erson	
Report: Actual/Estimated C Revenues for Caler			List Number of Profethis location and	essionals at	

ATTACH PROFESSIONALS' FULL NAMES WITH APPLICATION

ALL REVENUE INFORMATION IS KEPT CONFIDENTIAL (GEORGIA LAW)

CITY OF FAYETTEVILLE

Date:				
Property Address:				
Type of Business:				
Owner of Business:				
Business Name:				
The following signatures are required prior the Occupational Tax Clerk.	to applying for a business license.	Please return	completed	l form to
PLANNING AND ZONING: Eldridge Gu				No
Date: Comments:	Бу:			
SIGNS: Will new signs be installed for the If yes, has sign permit been approved?YALCOHOL: Serving or Retail Sale?Yaschools, churches, residences, etc., as described as the service of the	Yes No Sign Permit #_ Yes No If yes, does location	meet distance	– requireme	ents for
WATER AND SEWER/FINANCE: Eller Date: Comments:	By:			
WATER AND SEWER/SERVICE: Jeans Has service been applied for? Yes	ette Corley or designee (770-461-			
Date:	D			
FIRE DEPARTMENT: Marty Mundok of Date: Comments:	By:			
BUILDING DEPARTMENT: Tony Hapo Date: Comments:	By:			
Comments				

FAYETTE COUNTY E-9-1-1 COMMUNICATIONS

EMERGENCY CONTACT FORM

Name of Business:	
Business Address:	
Business Phone Number	
Business Owner(s) Name:	
Owner(s) Home Phone Number:(Eme	ergency use only)
Building Owner:	
Building Owner's Phone Number:	
	n gain access to the business after normal business hours in case of: m, or Other Emergency)
1) Name	Phone #
2) Name	Phone #
3) Name	Phone #

Fayette County E-9-1-1- Communications 140 Stonewall Avenue West Fayetteville GA 30214 (770) 461-4357

NEW OCCUPATIONAL TAX

Alcohol On-Premise Alcohol Off-Premise Restaurant	() () ()		New Business New Business Owner New Location Name Change Home Occupation	() () () ()
Business Located in Main S If so, how many employees		No		
	DATE:			
	PHONE:			
BUSINESS NAME		BUSINESS ADDI	RESS	
CONTACT PERSON		TYPE OF BUSINE	SSS	

OCCUPATIONAL TAX CERTIFICATE

DEPARTMENTAL APPROVALS

Prior to the issuance of an occupational tax certificate, application must be approved by each of the following departments. **Please call each department to make an appointment.**

Zoning Department 770-461-6029, Extension 4178

Eldridge Gunn

Water Department 770-460-4237

Ellen Walls

Fire Department 770-461-4548

Marty Mundock

Building Department 770-461-6029, Extension 4068

Tony Haponski

Fayette County Health Dept. 770-460-5730, Extension 5415

(Restaurants and Food Service)

Copy of Health Department certificate required before city license is issued.

Copy of state license required where applicable (hair salons, etc.)

IF YOUR BUSINESS MOVES FROM ONE LOCATION IN THE CITY OF FAYETTEVILLE TO ANOTHER, YOU MUST COMPLETE A NEW OCCUPATIONAL TAX (BUSINESS LICENSE) APPLICATION, COMPLETE WITH DEPARTMENTAL APPROVALS, TO ENSURE THAT YOUR NEW LOCATION MEETS THE REQUIREMENTS OF CITY ORDINANCES, AND TO PROVIDE CURRENT EMERGENCY CONTACT INFORMATION FOR THE FAYETTE COUNTY E-911 COMMUNICATIONS CENTER.

IF YOUR BUSINESS IS CLOSED OR MOVES OUT OF THE CITY LIMITS OF FAYETTEVILLE, PLEASE NOTIFY THE OCCUPATIONAL TAX OFFICE (770-461-6029) SO THAT YOUR ACCOUNT WITH THE CITY WILL BE CLOSED.

THIS LICENSE DOES NOT TRANSFER FROM ONE OWNER TO ANOTHER. THE NEW BUSINESS OWNER IS REQUIRED TO COMPLETE AND SUBMIT AN APPLICATION TO CITY HALL.